PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 10 66 4 69 9											
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)							SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS	16				Г	RATE	FEE		RATE	FEE	
FOR	MUNICEER FRUED		NUMBER EXTRA		8	ASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGE	! d minus 20⇒		. 0			X\$9=		OR	X\$18=		
INDEPENDENT CLAIMS		7 minus 3 -		2		t	X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT					0	t	+140=			+280=	
if the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	700
CLAIMS AS AMENDED - PART (I							IOIAL	<u> </u>	JON	OTHER	
//- 22 · (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	ENTITY
Total Independent	CLAIMS REMAINING AFTER AMENDMENT		HEGI- NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total	. 20	Minus	44	20	-	Γ	X\$ 9=		ОЯ	X\$18=	
Independent	• 3	Minus		3			X42-		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+260=	
							TOTAL		OR	YOYAL ADDIT FEE	
•			Cabo	mn 2)	(Column 3)	A	DOTT, FEE	·			
	(CORUMN 1) CLAIMS REMAINING AFTER AMENDMENT		High NUM PREVI	REST REER CUSLY FOR	PRESENT EXTRA		PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total Independent	· L	Minus	- 3	20	. –	lt	X\$ 9=		OR	X\$18=	
independent	. 5	Mirrus		3	• -	lt	X42=	· ·	OR	X84=	·
FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDEN	TOLAIM		1	+140=		OR	+280=	
						L	TOTAL		OR	FOTAL	
4-21-06	Acres and					^	DOTT. FEE		10,	ADOIT, FEE	
2 2 2 2 2	(Column 1) CLAIMS REMAINING AFTER		PREV	HEST MBER OUSLY	(Column 3) PRESENT EXTRA	١	RATE	ADDI- TIONAL	1	RATE	ADDI- TIONAL FFE
Total	AMENDMENT	Minus	PAL	20 20	. 3	H	YEO.	FEE	OR	X6463	
Total	• 3	Minus	 	3	-0	 	X48=			1200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		-
* If the entry is column 1 is less than the entry in column 2, write "O" in column 3.							#40=	-	OR	TOTAL	150
* If the entry is column 1 is less than the entry is column 2, write 'V' is column 3. ** If the entry is column 1 is less than the entry is column 2, write 'V' is column 3. ** If the Tegles Number Previously Paid For' IN THIS SPACE is less than 20, enter '20. *** The Tegles Number Previously Paid For' IN THIS SPACE to less than 3, enter '3. The Tegles Number Previously Paid For' (Itial or Independent) is the highest number found is the appropriate box in column 1.											
The Tighest N	umber Proviously P	old For (Total)	or Indepen	deni) is th	highest numb			_ ·	•	•	
DEM PTO-604 (Re-	4000 710	Coverences Print	on Officer 200	2 400 4440	9011	Poro	rs end Trad	orrest Office,	J.B. DE	PARTMENT C	F COMMERCE

Application or Docket Number